1188231

SEC 1972 (6/99) Potential persons who are to respond to the collection of information contained in this form are not required to respond unless the form displays currently valid OMB control number.

#### **ATTENTION**

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption state exemption unless such exemption is predicated on the filing of a federal notice.



UNITED STATES
SECURITIES AND EXCHANGE COMMISSION
Washington, D.C. 20549

## FORM D

# NOTICE OF SALE OF SECURITIES PURSUANT TO REGULATION D, SECTION 4(6), AND/OR UNIFORM LIMITED OFFERING EXEMPTION

OMB APPROVAL							
OMB Number:	3235-0076						
Expires:	May 31, 2005						
Estimated average burden							

SEC USE ONLY
Prefix Serial

DATE RECEIVED

hours per response

Name of Offering (□ check if	this is an amendment and name has changed, and indicate	change.)
CWS	Stone Lake, L.P.	/\
Filing Under (Check box(es) that	at apply): ☐ Rule 504 ☒ Rule 505 ☐ Rule 506	6 ☐ Section 4(6) / ☐ ULOE
Type of Filing:   ☐ New Filing:	ng 🗆 Amendment	
	A. BASIC IDENTIFICATION DATA	AEOLIVA
1. Enter the information reque	ested about the issuer	N Dana a MA
	this is an amendment and name has changed, and indicate of	e change.)
CWS Stone Lake, L.P.		
Address of Executive Offices	(Number and Street, City, State, Zip	o Code) Telephone Number (Including Area Code)
800 Newport Center Drive	e, Suite 400, Newport Beach, CA 92660	(949) 640-4200
Address of Principal Business C	Operations (Number and Street, City, State, Zip	Code) Telephone Number (lincluding Area Code)
same		PRACECC
Brief Description of Business		
Real Estate Acquis	sition and Investment	/ SEP 1 1 200
Type of Business Organization		THOMSON
□ corporation	☑ limited partnership, already formed	□ other (please specify):FINANCIAL
□ business trust	☐ limited partnership, to be formed	
Actual or Estimated Date of Inco	orporation or Organization: Month Year 0 2	x Actual □ Estimated
Jurisdiction of Incorporation or C	Organization: (Enter two-letter U.S. Postal Service abbreviat	ation for State:
	CN for Canada; FN for other foreign jurisdicti	ction) C A

# **GENERAL INSTRUCTIONS**

Federal:

Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4(6), 17 CFR 230.501 et seq. or 15 U.S.C. 77d(6).

When to File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address.

Where to File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549.

Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of manually signed copy or bear typed or printed signatures.

Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the Appendix need not be filed with the SEC.

Filing Fee: There is no federal filing fee.



### State:

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix in the notice constitutes a part of this notice and must be completed.

A. BASIC IDENTIFICATION DATA

<ul> <li>Each promoter of the issuer</li> </ul>	if the issuer has been organ			
<ul> <li>Each beneficial owner havin securities of the issuer;</li> </ul>		nized within the past five years se, or direct the vote or dispos		re of a class of equity
<ul> <li>Each executive officer and c</li> </ul>	lirector of corporate issuers	and of corporate general and r	managing partners o	of partnership issuers; and
• Each general and managing			50.	50
Check Box(es) that Apply:   ✓ Pro	omoter 🖾 Beneficial Ov	wner   Executive Office	er 🗆 Director	□ General and/or □ Managing Partner
Full Name (Last name first, if individua	l)			
CWS Willow Lake 02, L	.P			
Business or Residence Address (Num	ber and Street, City, State, 2	Zip Code)		
800 Newport Center Dr	ive, Ste. 400, N	Newport Beach, CA	92660	
Check Box(es) that Apply: □ Pro	moter 🛮 🖾 Beneficial Ov	vner	r 🗆 Director	□ General and/or Managing Partner
Full Name (Last name first, if individua	<b>l)</b>			
<u> CWSFG 02 - Willow Lak</u> e	e, LLC			
Business or Residence Address (Number	ber and Street, City, State, Z	Zip Code)		
800 Newport Center Dr.	<u>ive, Ste. 400, N</u>	Newport Beach, CA	92660	
Check Box(es) that Apply: ☐ Pro	moter   Beneficial Ov	vner	r 🗆 Director	□ General and/or │ Managing Partner
Full Name (Last name first, if individua	1)			
Steven J. Sherwood, as	Trustee of the St	even Sherwood Trus	t, establish	ned 9/8/94
Business or Residence Address (Num	ber and Street, City, State, Z	Zip Code)		
800 Newport Center Dr.	ive, Ste. 400, N	Newport Beach, CA	92660 _	
Check Box(es) that Apply:  ☐ Pro	moter   Beneficial Ov	vner	r 🗆 Director	□ General and/or Managing Partner
Full Name (Last name first, if individua	l)			
Clayton Williams & She	erwood Investmer	nts		
Business or Residence Address (Numl	ber and Street, City, State, Z	Zip Code)	-	
800 Newport Center Dr.	<u>ive, Ste. 400, N</u>	Newport Beach, CA	92660	
Check Box(es) that Apply: ☐ Pro	moter   Beneficial Ow	vner ☐ Executive Office	r 🗆 Director	☐ General and/or Managing Partner
Full Name (Last name first, if individua	1)		- <del>-</del>	
Business or Residence Address (Number	per and Street, City, State, Z	(ip Code)		
Check Box(es) that Apply: ☐ Pro	moter	vner	r 🗆 Director	☐ General and/or Managing Partner
Full Name (Last name first, if individua	1)			
	ber and Street, City, State, Z	Tio O and a N		

(Use blank sheet, or copy and use additional copies of this sheet, as necessary.)

					В.	INFORMA	TION ABOU	JT OFFER	NG				
												Yes	No
1.	Has th	ne issuer s	old, or does									⊠	
							dix, Column	-					
2.	What	is the mini	mum invest	ment that w	ill be accep	ited from ar	ny individual	!?				-	2,500
3.	Does	the offering	g permit joir	nt ownership	of a single	unit?						Yes ⊠	No
	simila is an a broke	r remunera associated r or dealer.	ation for soli person or a If more tha	citation of p	urchasers i oker or dea ersons to be	n connectio ler registere	n with sales ed with the S	of securities SEC and/or	es in the off with a state	ering. If a p or states, li	ny commiss person to be st the name you may se	listed of the	
Full	Name	(Last nam	e first, if inc	lividual)									
NO	NE								<u> </u>				
Bus	iness c	or Residen	ce Address	(Number a	nd Street, C	City, State, 2	Zip Code)						
N/Z	A										<del></del>		
		ssociated	Broker or D	ealer									
N/Z													<del></del>
				las Solicited vidual State								🗆 A	II States
	L]	[ AK ]	[AZ]	[AR]	[CA]	[ ĊO ]	[CT]	[DE]	[ DC ]	[FL]	[GA]	[HI]	[ID]
_	L)	[ IN ]	[IA]	[KS]	[KY]	[ LA ]	[ME]	[ MD ]	[ MA ]	[MI]	[MN]	[MS]	[ MO ]
-	•	-					-					_	
-	IT ]	[NE]	[ NV ]	[NH]	[NJ]	[ NM ]	[NY]	[NC]	[ ND ]	[ OH ]	[OK]	[OR]	[ PA ]
[ R		[ SC ]	[SD]	[TN]	[ TX ]	[ UT ]	[VT]	[ VA ]	[ WA ]	[ WV ]	[WI]	[ WY ]	[ PR ]
		(Last nam	e first, if ind	lividual)									
NOI Busi		r Posidon	oo Addross	(Number a	ad Stroot C	ity State 7	in Codo)			<del>-</del>		<del></del>	
N/A		n Nesideni	ce Address	(INUITIDET AI	ia Sueet, C	nty, State, 2	ip Code)						
		ssociated	Broker or D	ealer		<u>-</u>							
N/A													
		Vhich Pers	on Listed H	as Solicited	or Intends	to Solicit Po	urchasers		-	· · · · · · · · · · · · · · · · · · ·			
(Che	eck "Al	l States" oi	r check indi	vidual State	s)							🗆 A	ll States
[ A	L)	[ AK ]	[AZ]	[AR]	[ CA ]	[ CO ]	[CT]	[DE]	[ DC ]	[FL]	[ GA ]	[HI]	[ID]
ſI	Ll	[IN]	[IA]	[KS]					-	[MI]	[ MN ]	[MS]	[ MO ]
	IT]	[NE]	[NV]	[ NH ]	[NJ]	[ NM ]	[ NY ]	[NC]	[ND]	[ OH ]	[OK]	[OR]	[PA]
[ R	_	[SC]	[SD]	[TN]	[TX]	[UT]	[ VT ]	[ VA ]	[ WA ]	[ WV ]	[WI]	[ WY ]	[ PR ]
			e first, if ind		[ 121 ]	[01]	[ • - ]	[ VZZ ]	[ 1121 ]	[ •• • ]	[ 11 44 ]	[ (12 ]	[ 21, ]
NOI		\_a	oo.,o	iiiiaaai)									
_		r Residen	ce Address	(Number a	nd Street, C	city, State, Z	Zip Code)				<del></del>		
N/A				,		•	. ,						
		ssociated	Broker or D	ealer				-					
<u>N/2</u>	<u> </u>												<u>-</u>
State	es in V	Vhich Pers	on Listed H	as Solicited	or Intends	to Solicit Pr	urchasers					_	
(Che	eck "Al	States" o	r check indi	vidual State	s)							🗆 А	ll States
[ A	L]	[ AK ]	[AZ]	[ AR ]	[CA]	[ CO ]	[CT]	[ DE ]	[ DC ]	[FL]	[GA]	[HI]	[ID]
[ I	L]	[ IN ]	[ AI ]	[KS]	[KY]	[LA]	[ ME ]	[ MD ]	[ MA ]	[MI]	[ MN ]	[MS]	[ MO ]
[ M	T]	[ NE ]	[NV]	[ NH ]	[ NJ ]	[ NM ]	[ NY ]	[ NC ]	[ ND ]	[ OH ]	[ OK ]	[OR]	[ PA ]
[ R		[SC]	[SD]	[ TN ]	[ TX ]	[UT]	[VT]	[VA]	[WA]	[WV]	[WI]	[WY]	[PR]

(Use blank sheet, or copy and use additional copies of this sheet, as necessary.)

	C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF F	ROCEEDS		
1.	Enter the aggregate offering price of securities included in this offering and the total amount already sold. Enter "0" if answer is "none" or "zero." If the transaction is an exchange offering, check this box $\square$ and indicate in the columns below the amounts of the securities offered for exchange and			
	already exchanged.			
	alleady exchanged.	Aggregate	,	Amount Already
	Type of Security	Offering Price	•	Sold
	Debt	\$	\$_	-0 <b>-</b>
	Equity	\$	\$_	-0-
	☐ Common ☐ Preferred			
	Convertible Securities (including warrants)	\$	\$_	
	Partnership Interests	\$ 5,000,000	\$_	3,024,100
	Other (Specify)	\$	\$_	
	Total	\$ 5,000,000	\$_	3,024,100
	Answer also in Appendix, Column 3, if filing under ULOE.			
2.	Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero."			
			Α	ggregate Dollar
		Number Investors		Amount of Purchases
	Accredited Investors		Ċ	2,734,500
	Non-accredited Investors			289,600
	Total (for filings under Rule 504 only)			200,000
	Answer also in Appendix, Column 4, if filing under ULOE.		Υ_	
	Answer also in Appendix, Column 4, ir ming under OLOE.			
3.	If this filing is for an offering under <u>Rule 504</u> or <u>505</u> , enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C-Question 1.			
	Type of offering	Type of Security		Dollar Amount Sold
	Rule 505	•	ė	3,024,100
	Regulation A		٠,	3,024,100
	•		٠,-	
	Rule 504		\$_ ^	
	Total		\$_	
4.a.	Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the issuer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate.			
	Transfer Agent's Fees		s	-0-
	Printing and Engraving Costs			-0-
	Legal Fees		_	61,250
	Accounting Fees			-0-
	Engineering Fees			-0-
	Sales Commissions (specify finders' fees separately)			-0-
	Other Expenses (identify) <u>Due Diligence and Consulting</u>		_	53,900
	Total		_	115,150
			·	

	C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND US	E OF	PROCEEDS		
b	Enter the difference between the aggregate offering price given in response to Part C - Question 1 and total expenses furnished in response to part C - Question 4.a. This difference is the "adjusted gross proceeds to the issuer."			\$ <sub>.</sub>	4,884,850
5.	Indicate below the amount of the adjusted gross proceeds to the issuer used or proposed to be used for each of the purposes shown. If the amount for any purpose is not known, furnish an estimate and check the box to the left of the estimate. The total of the payments listed must equal the adjusted gross proceeds to the issuer set forth in response to Part C - Question 4.b above.				
	· .		Payments to Officers, Directors & Affiliates		Payments To Others
	Salaries and fees	□ \$	0-	⊠ \$.	363,467
	Purchase of real estate	□ \$	-0-	⊠ \$	3,803,257
	Purchase, rental or leasing and installation of machinery and equipment	□\$	-0-	□\$	-0-
	Construction or leasing of plant buildings and facilities	□ \$	-0-	□\$.	-0-
	Acquisition of other businesses (including the value of securities involved in this offering that may be used in exchange for the assets or securities of another issuer pursuant				
	to a merger)	□ \$ <sub>.</sub>		•	-0-
	Repayment of indebtedness			□\$.	-0-
	Working capital	□ \$ <sub>.</sub>		⊠ \$	718,126
	Other (specify): Project Management				
			0		-0-
	Orborn Table		•	□ s	
	Column Totals			٠.	
	Total Payments Listed (column totals added)		⊠ \$	4,88	<u>4,850</u>

	D. F	EDERAL	SIGNATURE			
The issuer has duly caused this notice to be signed by th following signature constitutes an undertaking by the issuits staff, the information furnished by the issuer to any notice.	ier to f	urnish to th	ne U.S. Securities and Exchange Comm	nission, upon written request of		
Issuer (Print or Type)	Sign	ature		Date		
CWS Stone Lake, L.P.				September 6, 2002		
Name of Signer (Print or type)	Title (Print or Type)					
Mary Ellen Barlow	By: CWS Willow Lake 02, L.P., a California limited partnership, General Partner					
		Ву:	CWSFG 02 - Willow Lake, LLC, a California limited liability company, General Partner  By:  Mary Ellen Barlow, Vice Presidents	Salow) ident		

**ATTENTION** 

Intentional misstatements or omissions of fact constitute federal criminal violations. (See 18 U.S.C. 1001.)

## E. STATE SIGNATURE

- The undersigned issuer hereby undertakes to furnish to any state administrator of any state in which this notice is filed, a notice on Form D
  (17 CFR 239,500) at such times as required by state law.
- 3. The undersigned issuer hereby undertakes to furnish to the state administrators, upon written request, information furnished by the issuer to offerees.
- 4. The undersigned issuer represents that the issuer is familiar with the conditions that must be satisfied to be entitled to the Uniform limited Offering Exemption (ULOE) of the state in which this notice is filed and understands that the issuer claiming the availability of this exemption has the burden of establishing that these conditions have been satisfied.

The issuer has read this notification and knows the contents to be true and has duly caused this notice to be signed on its behalf by the undersigned duly authorized person.

Issuer (Print or Type)	Signature	Date					
CWS Stone Lake, L.P.		September 6, 2002					
Name of Signer (Print or type)  Title of Signer (Print or Type)							
Mary Ellen Barlow	By: CWS Willow Lake 02, L.P., a California limited partnersh General Partner						
	a Cali	02 - Willow Lake, LLC, ifornia limited liability company, al Partner May Elles Ballow Mary Elfen Barlow, Vice President					

## Instruction:

Print the name and title of the signing representative under his signature for the state portion of this form. One copy of every notice on Form D must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

					APPENDIX					
1		2	3		4		<del></del>		5	
	to non-a investor	to sell ccredited s in State	Type of security and aggregate offering price offered in state (Part C-Item 1)		Type of investor and amount purchased in State (Part C-Item 2)					
State	Vaa	NI-		Number of Accredited		Number of Non-Accredited				
State AL	Yes	No		Investors	Amount	Investors	Amount	Yes	No	
AK								!	<b>—</b> —	
ΑZ										
AR									<del>                                     </del>	
CA	Х		LP Interest	48	\$2,532,500	11	\$237,000		Х	
co										
CT										
DE				·					<u> </u>	
DC										
FL GA	Х		LP Interest	11	\$40,000	1	\$20,000		X	
HI					<del> </del>			!	<del> </del>	
ID					<del> </del>				<del> </del>	
IL										
IN										
IA										
KS										
KY										
LA									<u> </u>	
ME		<del></del>							<u> </u>	
MD MA							· · · · · · · · · · · · · · · · · · ·		<del>                                     </del>	
MI			<del>  </del>							
MN		·			<del>                                     </del>	· · · · · · · · · · · · · · · · · · ·			<del>                                     </del>	
MS									<del>                                     </del>	
MO										
MT										
NE										
NV										
NH					ļ					
NJ NM		Х	LP Interest	11	\$25,000				Х	
NY								<del></del>	<del> </del>	
NC									<del></del>	
ND										
ОН	Х		LP Interest	1	\$44,000	]	\$7,000		х	
OK										
OR	Х		LP Interest			1	\$6,400		Х	
PA		Х	LP Interest	1	\$25,000		·		Х	
RI	Х		LP Interest	·		1	\$10,000		Х	
SC		<del>- ,  </del>	ID Teter						<b></b>	
SD TN		Х	LP Interest	1	\$18,000			-		
TX	Х		LP Interest	1	\$50,000	1	\$2,500	7	<del>                                     </del>	
_	1				420,000		\$2,500		x	
UT										

					APPENDIX						
1		2	3		<del> </del>	4		5			
	to non-a investor	I to sell ccredited s in State l-Item 1)	Type of security and aggregate offering price offered in state (Part C-Item 1)	Type of investor and amount purchased in State (Part C-Item 2)		amount purchased in State (Part C-Item 2)					
State	Yes	No		Number of Accredited Investors	Amount	Number of Non-Accredited Investors	Amount	Yes	No		
VA	Х		LP Interest			1	\$6,700		Х		
WA											
WV											
WI											
WY											
PR											